National Population Policy

53. SHRI RAMDAS AGARWAL: Will the MINISTER OF HEALTH AND FAMILY WELFARE be pleased to state:

(a) what concrete steps Government have taken to stablize the unregulated growth of population to give incentives to persons with small families and to undertake half-yearly or yearly survey of increase/decrease in population after adoption of a comprehensive National Population Policy, State-wise;

(b) whether any campaign has been launched, so far against the practice of female foeticide in order to arrest the adverse sex ratio in certain States; and

(c) by when the Pre-Natal Diagnostics Act, 1994 will be amended/brought before Parliament for approval?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. C. P. THAKUR): (a) The following are some of the initiatives taken during the last two years on the issue of containing the growth of population and expediting the pace of implementation of National-Family Welfare Program:

Stabilizing population

For the first time in independent India, a comprehensive National Population Policy has been adopted by the Government with the objective of improving the quality of life of the citizens, by reaching out to them with an enhanced package of services and supplies, that will *inter-alia*, serve to stabilize the unregulated growth of population.

National Commission on Population has been constituted directly under the chairmanship of Prime Minister with Chief Ministers of all States/ UTs, demographers, non-government organizations and public health professionals as members to advise in operationalising the National Population Policy.

An Empowered Action Group has been constituted under the chairmanship of the Union Health and Family Welfare Minister for focussed attention on improving the coverage and outreach of services in the eight States of Uttar Pradesh, Uttranchal, Bihar, Jharkhand, Rajasthan, Orissa, Madhya Pradesh and Chhatisgarh, involving voluntary associations, community organizations and Panchayati Raj institutions in this national effort.

Series of consultations have been held with all stakeholders *i.e.* the State Health and Family Welfare Ministers, State Secretaries, professional medical associations and medical experts, NGOs, media persons, Corporate sector and civil society for implementation of the National Population Policy, 2000.

In order to arrest the adverse sex ratio, an intensive campaign has been launched against the practice of female foeticide through the mass media, print and electronic, as well as through the voluntary organizations for stricter enforcement of the Law. The Pre-Natal Diagnostics Techniques Act, 1994 is being amended as well to cover the new emerging technologies and for ensuring effective implementation of the Act.

Male participation in the programme has increased mainfold with the growing popularity of No Scalpel Vasectomy—a much-improved method.

Upgradation of health infrastructure

The Prime Minister's Gramodaya Yojna has provided in the two years 2000-2001 and 2001-02 central allocation of Rs. 809 crores for the maintenance and upkeep of primary health infrastructure in rural India.

Area specific projects have been taken up for strengthening primary health care services in the States of Madhya Pradesh, Rajasthan, Orissa, Maharashtra, Gujarat and Kerala under Integrated Population Development (IPD) Project supported by UNFPA, for slums in cities/ towns in the States of Andhra Pradesh, Karnataka and West Bengal in World Bank supported IPP VIII project, in Assam and Karnataka IPP IX project, in 33 district of U.P. under IFPS project supported by USAID, in Tamil Nadu, Maharashtra and demographically deficient areas under various programmes with the assistance of DANIDA, DFID and World Bank.

Norms for payment for items like rent, contigencies, stipend etc. for family welfare infrastructure units which were fixed in 1970s and 80s have been revised.

In order to strengthen the availability of health staff steps like development of cadre of Nurse Midwives in public and private

sector, contractual appointments of ANMs, Public Health Nurses, and Laboratory Technicians have taken. Private Doctors and Anesthetists are being engaged on payment per visit basis.

Integrated service delivery: Reproductive health

- Immunization is key to health of children by reducing infant mortality. RCH outreach services such as immunization, ante and post natal check ups, information and counselling, as well as contraceptive services are being provided. This scheme which covered 50 district last year, has been extended during the current year to 101 additional districts.
- In an effort to supplement existing interventions seeking to expand outreach and coverage, a series of "Parivar Kalyan and Swasthya Melas" have been held all over the country including Mathura, Delhi, Lucknow , Kargil, Patna, Badal, Perambur, Sultanpur (U.P.) and Ghazipur (U.P.). Many more are being planned.
- RCH Camps are also periodically organised at primary health centres for providing integrated services to the rural population, especially women and children, in remote and under-services to the rural population, especially women and children, in remote and under-served areas. The scheme, which was started in 101 district last year, has now been extended to 77 additional districts in the current year.
- The programme for training of traditional birth attendants (Dais), with provision of kits, has been introduced in 142 districts with a record of less than 30% safe deliveries.
- Resources and skills of the Indian Systems of Medicine are also being utilized in the RCH Program. Effective Ayurved and Unani medicines for common ailments of women and children are being supplied to Sub Centres/institutions in 7 States, in particular.
- Private-public partnership through the NGO movement has been net-worked in 412 districts.

●Polio on its way out

- Intensive Pulse Polio campaigns have helped in reducing the number of confirmed polio cases from 1126 in 1999 to 265 in year

2000 and to 112 this year. Transmission of the virus is now virtually confined to a few districts of Uttar Pradesh and Bihar. During the current year, in addition to strengthening the routine immunization programme, two National Immunization Days will be organised all over the country on December 2, 2001 and January 20, 2002. One Sub-National Immunization Day has been held on October 14, 2001, in the States of Uttar Pradesh, Bihar, Delhi and West Bengal. With vigorous implementation of the programme and intensified efforts in Uttar Pradesh and Bihar, we are confident that *"Zero incidence of Polio"* will be reached by next year.

New Programme on Newborn Care

- Neonatal mortality comprises over 50% of the infant mortality in the country. To serve the lives of the Newborn, a special Newborn care programme was launched in 60 district of the country in collaboration with the National Neonatalogy Forum last year. This programme will be extended to other backward district this year. Another initiative being encouraged by the Government for proper newborn care is training and empowering of community level newborn care workers, specially through NGOs.

- The Pilot project for testing the feasibility of introducing Hepatitis-B vacine in immunization programme in slums of 15 metropolitan cities and 32 selected rural districts has been approved by the Government.

(b) and (c) After the Census 2001 figures were available, letters have been addressed to the Chief Ministers of all States/UTs to give focussed attention to the issue of adverse sex ratio. Chief Secretaries of all the States/UTs have also been addressed recently for following up on implementation of various provisions of the Pre-natal Diagnostic Technique Act. The States/UTs have been advised to mount an effective awareness compaign to make the public and service providers aware of the provisions of the Act. The States/UTs have also been advised to provide protection to social activists and Non-Governmental Organizations giving information or filing complaints of violation of provisions of the Act.

Workshops/Seminars are being organised at State/district level, to create awareness about the provisions of the Act. Voluntary Organisations are also being involved to carry out projects regarding creating awareness about the

provisions of the Act. Grant-in-aid has also been released to two NGOs *viz.* Orissa Voluntary Health Association and Voluntary Health Association of India, New Delhi to conduct seminars and workshops and other Information, Education and Communication (IEC) activities in the States of Orissa, Punjab, Madhya Pradesh, Uttar Pradesh, Himachal Pradesh, Rajasthan and Tamil Nadu.

National Level Non-Governmental Organisations have been requested to take up projects for generating awareness about the provisions of the Act, among doctor/clinics law enforcing authorities and public at large. In December, 2000 the Department of Family Welfare has written letters to 82 Mother NGOs to direct the field NGOs to generate within their jurisdiction, awareness and public opinion against the mal-practice of selective abortion. The co-operation of the NGOs has also been requested in listing and enumerating, within their jurisdiction, the name and address of premises where the Medical Termination of Pregnancy (MTP) is being performed, with a view to detect registered/ unregistered clinics.

The Technical Sub-Committee of the Central Supervisory Board of the Pre-natal Diagnostic Techniques (Regulation and Prevention of Misuse) Act, 1994 has suggested necessary amendments to be made in the Act in view of the emerging technologies including separation of X and Y chromosome leading to selection of sex of unborn child before conception as well as name and preamble of the existing Act. The Central Supervisory Board of the Pre-natal Diagnostic Techniques (Regulation and Prevention of Misuse) Act, 1994, in its meeting held on 18th October, 2001 has given is consent to the amendment suggested by the Technical Sub-Committee. The proposed Bill for amendments may be brought in the current session of Parliament.

Oral cancer

54. SHRI SURESH PACHOURI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether more than 70,000 new cases of oral cancer are coming to light every year in the country;

(b) whether in view of above fact, dental experts have demanded ban on "Gutka' and "Pan Masala', the main cause of increasing oral cancer; and

(c) if so, the steps taken by Government in this regard?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. C. P. THAKUR): (a) Based on the data from Population Based Cancer Registries